

A Rare Case of Anterior Hip Dislocation

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INTRODUCTION:

Hip joint is a ball and socket type of joint which is strong and stable due to its bony structure and ligamentous attachment. Hip dislocations after trauma are frequently encountered in emergency department, however anterior hip dislocation with no associated fractures is a rarity. Accurate diagnosis and emergent treatment are paramount to prevent further complications.

REPORT:

32-year-old gentleman presented to emergency department with pain and swelling over left hip following a road traffic accident. Patient was a motorbike rider who collided with a car and fell in left hip abducted position. At emergency department, patient's left lower limb was in abducted and externally rotated position. Tenderness and swelling over anterior aspect of right hip noted. No neurovascular deficit. Xray showed left hip anterior dislocation with no associated fractures.

Emergent reduction was done under sedation in emergency department 6 hours post trauma. Reduction was achieved by longitudinal traction of left lower limb with knee flexed and followed by internal rotation and adduction. An audible click was heard indicating the hip joint was reduced. Post procedure radiography showed anatomical reduction.

Post reduction neurovascular status was intact. Patient was admitted and immobilized with skin traction for 2 weeks then discharged with non-weight bearing crutches ambulation. At 1st follow up after 1 month, patient was well with no hip pain.

Figure 1: Pre reduction Xray



Figure 2: Post reduction Xray



CONCLUSION:

Anterior hip dislocation happens when the hip is forced into abduction with external rotation of the thigh. This type of injury is extremely rare case and very few similar cases have been reported around the world. Due to the required mechanism of injury, a full trauma evaluation for other associated injuries should be considered. Prompt reduction of this dislocation is imperative. Delay in treatment can have consequences such as avascular necrosis or osteoarthritis.

REFERENCES:

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